

APPLICATION FOR LOT IN HIGHLAND CEMETERY
LYME, NEW HAMPSHIRE

Name of applicant _____ Date _____

Address _____

Resident of Lyme _____ Former resident* _____ *10 years or more of adult residence

Fee per gravesite: \$150 (Checks payable to "Town of Lyme")

Lot size: Single _____ Double _____ Triple _____

Note: Up to 4 cremation urns are permitted per single lot

Name(s) of those to be buried in this lot

1. _____
2. _____
3. _____
4. _____

I hereby agree to abide by the regulations of the Cemetery Commission that this lot is for the interment of myself and/or members of my immediate family.

Signed _____ Date _____

Lot Number _____ Sexton _____ Date _____

Selectman _____ Date _____
